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CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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GOVERNOR'S OFFICE LEGAL AFFAIRS

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
Marcroft	Ryan	Winston	(916) 445-0873
MAILING ADDRESS STREET (May use business address)	CITY	STATE ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRESS
State Capitol	Sacramento	CA 95814	
1. Office, Agency, or Court		4. Schedule Summa	ıry
Name of Office, Agency, or Court:		→ Total number of pages including this cover page:1	
Governor's Office			
Division, Board, District, if applicable:		 ⇒ Check applicable schedules or "No reportable interests." I have disclosed interests on one or more of the attached schedules: 	
Legal Affairs			
Your Position:			
Deputy Secretary		Schedule A-1 Yes -	schedule attached
If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)		Investments (Less than 10% Ownership)	
	-	Schedule A-2 Yes -	schedule attached
Agency:		Investments (10% or greater Or	wnership)
Designation of the second seco			schedule attached
Position:		Real Property	
2. Jurisdiction of Office (Check at least one box)		Schedule C Yes – schedule attached Income, Loans, & Business Positions (Income Other than Gifts	
X State		and Travel Payments)	98 78 99 900° MTA 1185
County of		Schedule D Yes – schedule attached Income – Gifts	
☐ City of		Schedule E Yes -	schedule attached
Multi-County		Income - Travel Payments	
☐ Other		-or-	
		X No reportable interest	s on any schedule
3. Type of Statement (Check	k at least one box)		201-00/10/2000 -
☐ Assuming Office/Initial Date	:	5. Verification	
🗵 Annual: The period covered is J	anuary 1, 2007,		
through December 31, 2007.			ole diligence in preparing this this statement and to the best of
-or-	/ 11		ion contained herein and in any
O The period covered is/_ December 31, 2007.	, through	attached schedules is true	
Leaving Office Date Left:/		I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	
(Check one)			/ /
O The period covered is January 1, 2007, through the date of leaving office.		Date Signed	11/08
-or-		Date Signat	
O The period covered is/_ the date of leaving office.	, through	Signature	
☐ Candidate			